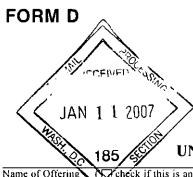
1297082



UNITED STATES
SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

# **FORM D**

NOTICE OF SALE OF SECURITIES
PURSUANT TO REGULATION D,
SECTION 4(6), AND/OR
UNIFORM LIMITED OFFERING EXEMPTION

OMB APPROVAL
OMB Number: 3235-0076
Expires: May 31, 2005
Estimated average burden



165/69	
Name of Offering ( check if this is an amendment and name has changed, and indicate change.)	
Fairfield Financial Services, Inc.	
Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506 Section 4(6	5) ULOE
Type of Filing: New Filing Amendment	<b>-</b>
A. BASIC IDENTIFICATION DATA	
1. Enter the information requested about the issuer	
Name of Issuer ( check if this is an amendment and name has changed, and indicate change.)	
Fairfield Financial Services, Inc.	
Address of Executive Offices (Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
1522 NW 24th Ave., Portland, OR 97210	503-348-7011
Address of Principal Business Operations (Number and Street, City, State, Zip Code) (if different from Executive Offices)	Telephone Number (Including Area Code)
Brief Description of Business Mortgage broker who brokers private investor loans se	PROCESSED
Type of Business Organization	,
✓ corporation       ☐ limited partnership, already formed       ☐ other         ☐ business trust       ☐ timited partnership, to be formed	(please specify): JAN 1 9 2007
Actual or Estimated Date of Incorporation or Organization: O 6 9 8 / Actual Est  Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for Sta  CN for Canada: FN for other foreign jurisdiction)	imated THOMSON FINANCIAL

#### GENERAL INSTRUCTIONS

#### Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

#### State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

## - ATTENTION -

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predictated on the filing of a federal notice.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

# A. BASIC IDENTIFICATION DATA Enter the information requested for the following: Each promoter of the issuer, if the issuer has been organized within the past five years; Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer. Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and Each general and managing partner of partnership issuers. Beneficial Owner Executive Officer [7] Director General and/or Check Box(es) that Apply: Promoter Managing Partner Full Name (Last name first, if individual) Grover W. Sparkman, Jr. Business or Residence Address (Number and Street, City, State, Zip Code) 3327 SE 50th, Portland, OR 97206 Beneficial Owner Executive Officer Check Box(es) that Apply: Promoter General and/or ✓ Director Managing Partner Full Name (Last name first, if individual) M. Louise Sparkman Business or Residence Address (Number and Street, City, State, Zip Code) 3327 SE 50th, Portland, OR 97206 Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer General and/or Managing Partner Full Name (Last name first, if individual) S. Clay Sparkman Business or Residence Address (Number and Street, City, State, Zip Code) 1522 NW 24th Ave., Portland, OR 97210 Beneficial Owner Executive Officer Director Check Box(es) that Apply: Promoter General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: Promoter ☐ Beneficial Owner ☐ Executive Officer ☐ Director General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) General and/or Check Box(es) that Apply: Promoter Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) General and/or Promoter Check Box(es) that Apply: Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code)

					B. II	NFORMAT	ION ABOU	T OFFERI	NG		•		
1	1. Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?									Yes	No		
١.	rias inc	issuct soic	i, or does ti			Appendix							☑
2.										s			
										Yes	No		
3.										7			
	commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only.												
Full			first, if indi		ıc								
Busi			Address (N			ty, State, Z	(ip Code)						
	1522 N	W 24th Av	ve., Port	land, OR					···				
Nam	ne of Ass	ociated Br	oker or De	aler									
State	es in Wh	ich Person	Listed Has	Solicited	or Intends	to Solicit	Purchasers	•••					
	(Check	"All States	s" or check	individual	States)	•••••	***************************************			*************			l States
	AL	AK	AZ	AR	CA	CO	CT	DE	DC	FL	GA	HI	ID
	II.	IN	IA	KS	KY	LA	ME	MD	MA	MI	MN	MS	MO
	MT RI	NE SC	NV SD	NH TN	NJ TX	NM UT	NY VT	NC VA	ND WA	OH WV	OK WI	QR WY	PA PR
	<u>[KI]</u>	[ <u>3C</u> ]	[35]		<u> </u>	<u>[01]</u>	<u> </u>	[VA]	WA	(W V)		<u> </u>	<u> </u>
Full	Name (1	ast name	first, if ind	ividual)									
Busi	iness or	Residence	Address (1	Number an	d Street, C	ity, State, 2	Zip Code)						
Nam	ne of Ass	ociated Br	oker or De	aler									
State	es in Wh	ich Person	Listed Has	Solicited	or Intends	to Solicit	Purchasers			•			
	(Check	"All States	or check	individual	States)		······	***************************************				☐ Al	1 States
	AL.	AK	AZ	AR	CA	CO	<u>CT</u>	DE	DC	FL	GA	HI	ID
	IL.	IN	IA	KS	KY	LA	ME	MD	MA	MI	MN	MS	MO
	MT RI	NE SC	NV SD	NH]	NJ TX	NM UT	NY VT	NC VA	ND WA	OH WV	OK WI	OR WY	PA PR
Full			first, if indi										
	ranne (i	Sast name		ividual)									
Busi	iness or	Residence	Address (1	Number an	d Street, C	ity, State, 2	Zip Code)						
Nam	ne of Ass	ociated Br	oker or De	aler							· · · · · · · · · · · · · · · · · · ·		
State	es in Wh	ich Person	Listed Has	Solicited	or Intends	to Solicit	Purchasers						
	(Check	"All States	or check	individual	States)		****************	·····				VI	l States
	AL	AK	AZ	AR	CA	CO	CT	DE	DC	FL	GA	H	ĪD
	IL NOT	IN	IA NV	[KS]	KY	LA	ME	MD	MA	MI		MS OR	MO
	MT RI	NE SC	NV SD	NH TN	NJ TX	NM UT	NY VT	NC VA	ND WA	OH WV	OK WI	OR WY	PA PR

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

•	C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS
Enter the a	ggregate offering price of securities included in this offering and the total amount already

already exchanged.  Type of Security		Aggregate Offering Price	Amount Already Sold
Deht		\$ 67,000	s 67,000
Equity	Common Preferred		
Convertible Securities (inclu	uding warrants)	\$	
•		•	
	Appendix, Column 3, if filing under ULOE.		· <u> ·</u>
the number of persons who ha	ar amounts of their purchases. For offerings under Rule 504, incave purchased securities and the aggregate dollar amount of other "0" if answer is "none" or "zero."		Aggregate Dollar Amount
		Investors	of Purchases
Accredited Investors		Ч	<u>\$ 67,000</u>
			<b>\$</b>
Total (for filings up	nder Rule 504 only)	Ч	\$ 67,000
Answer also	o in Appendix, Column 4, if filing under ULOE.		
sold by the issuer, to date, in of	der Rule 504 or 505, enter the information requested for all secure ferings of the types indicated, in the twelve (12) months prior ffering. Classify securities by type listed in Part C — Question	to the on 1.	
Type of Offering		Type of Security	Dollar Amount Sold
		-	\$
			\$ \$
	Note		
1.010 204			<u> </u>
Total			\$
a. Furnish a statement of all securities in this offering. Excl The information may be given a	I expenses in connection with the issuance and distribution of lude amounts relating solely to organization expenses of the in as subject to future contingencies. If the amount of an expendit and check the box to the left of the estimate.	of the surer.	\$
a. Furnish a statement of all securities in this offering. Excl The information may be given a not known, furnish an estimate	expenses in connection with the issuance and distribution of lude amounts relating solely to organization expenses of the in as subject to future contingencies. If the amount of an expendit	of the surer, ture is	s <u> </u>
a. Furnish a statement of all securities in this offering. Excl The information may be given a not known, furnish an estimate Transfer Agent's Fees	expenses in connection with the issuance and distribution of lude amounts relating solely to organization expenses of the in as subject to future contingencies. If the amount of an expendit and check the box to the left of the estimate.	of the surer. ture is	
a. Furnish a statement of all securities in this offering. Excl The information may be given a not known, furnish an estimate Transfer Agent's Fees Printing and Engraving Co.	I expenses in connection with the issuance and distribution of lude amounts relating solely to organization expenses of the in as subject to future contingencies. If the amount of an expendit and check the box to the left of the estimate.	of the surer. ture is	s <u>o</u>
a. Furnish a statement of all securities in this offering. Excl The information may be given a not known, furnish an estimate Transfer Agent's Fees Printing and Engraving Co Legal Fees	I expenses in connection with the issuance and distribution of lude amounts relating solely to organization expenses of the in as subject to future contingencies. If the amount of an expendit and check the box to the left of the estimate.	of the surer. ture is	s <u>O</u>
a. Furnish a statement of all securities in this offering. Excl The information may be given a not known, furnish an estimate Transfer Agent's Fees  Printing and Engraving Collegal Fees	I expenses in connection with the issuance and distribution of lude amounts relating solely to organization expenses of the in as subject to future contingencies. If the amount of an expendit and check the box to the left of the estimate.	of the surer. ture is [	\$ <u>0</u>
a. Furnish a statement of all securities in this offering. Excl The information may be given a not known, furnish an estimate Transfer Agent's Fees Printing and Engraving Co Legal Fees	I expenses in connection with the issuance and distribution of lude amounts relating solely to organization expenses of the in as subject to future contingencies. If the amount of an expendit and check the box to the left of the estimate.	of the surer. ture is [	\$ <u>0</u>
a. Furnish a statement of all securities in this offering. Excl The information may be given a not known, furnish an estimate Transfer Agent's Fees Printing and Engraving Co Legal Fees	I expenses in connection with the issuance and distribution of lude amounts relating solely to organization expenses of the in as subject to future contingencies. If the amount of an expendit e and check the box to the left of the estimate.	of the surer. ture is [	\$ 0

	- C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF P	ROCEEDS	
	b. Enter the difference between the aggregate offering price given in response to Part C — Question 1 and total expenses furnished in response to Part C — Question 4.a. This difference is the "adjusted gross proceeds to the issuer."		\$ 67,000
	Indicate below the amount of the adjusted gross proceed to the issuer used or proposed to be used for each of the purposes shown. If the amount for any purpose is not known, furnish an estimate and check the box to the left of the estimate. The total of the payments listed must equal the adjusted gross proceeds to the issuer set forth in response to Part C — Question 4.b above.		
		Payments to	
		Officers, Directors, &	Payments to
		Affiliates	Others
	Salaries and fees[	<b></b>	
	Purchase of real estate[		\$
	Purchase, rental or leasing and installation of machinery		
	and equipment[	<del></del>	<del></del>
	Construction or leasing of plant buildings and facilities		\$
	Acquisition of other businesses (including the value of securities involved in this offering that may be used in exchange for the assets or securities of another issuer pursuant to a merger)	¢	шέ
	•		<del></del>
	Repayment of indebtedness	_	<del></del>
	Working capital [	<del></del>	<del>_</del>
	Other (specify):	⊼ ₂	- □ •
		¬\$	□\$
	Column Totals		<b>S</b>
	Total Payments Listed (column totals added)	<b>\$</b>	0
	D. FEDERAL SIGNATURE		
sign	issuer has duly caused this notice to be signed by the undersigned duly authorized person. If this notice ature constitutes an undertaking by the issuer to furnish to the U.S. Securities and Exchange Commis information furnished by the issuer to any non-accredited investor pursuant to paragraph (b)(2) of I	sion, upon writte	
ssue	er (Print or Type) Signature	Date /-/	
7	Fair field Financial Services from Whitelm	1/3/8	2007
	e of Signer (Print or Type)  Title of Signer (Print or Type)		
G	rover W. Sparkman, gre President	,	
•	•		

1.	Is any party described in 17 CFR 230.262 presently subject to any of the disqualification  Yes No provisions of such rule?								
	See Appendix, Column 5, for state response.								
2.	The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed a notice on Form D (17 CFR 239.500) at such times as required by state law.								
3.	The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.								
4.	The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied.								
	er has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the undersigned horized person.								
_	rint or Type) Signature Special Services in Special 1/3/2007								
	Print or Type) Title (Print or Type)								
Brox	ere W. Spoukman, SR President								

**E. STATE SIGNATURE** 

## Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

	APPENDIX									
1	Intend to non-a investor	2 I to sell ccredited s in State -Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)		Type of investor and amount purchased in State (Part C-Item 2)					
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No	
МО										
МТ										
NE										
NV										
NH										
NJ										
NM										
NY										
NC										
ND										
ОН										
OK	-									
OR	·		67,000	4	67,000	<u> </u>				
PA										
RI						:				
SC SD										
TN								_		
TX										
UT										
VT										
VA										
WA										
wv										
wi								i		
L					<u> </u>					

				APP	ENDIX				
1	I 2 3  Intend to sell to non-accredited investors in State (Park P. Mr. 1)  Type of security and aggregate offering price offering price offered in state			Type of investor and amount purchased in State (Part C-Item 2)				5 Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)	
State	Yes	No	(Part C-Item 1)	Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
WY									
PR									

i